



**2013 Form 355** XXXXXXXXXXXX  
Business or Manufacturing Corporation Excise Return

Year beginning XXXXXXXX Ending XXXXXXXX

AREA RESERVED  
FOR 2-D BARCODE

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXXX FEDERALIDNO  
PRINCIPALBUSINESSADDRESS CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX  
PRINCBUSINESSADDRESSINMA CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX

1. Is the corporation incorporated within Massachusetts? ▶ ☒ Yes ☒ No
2. Type of corporation ▶ ☒ Section 38 manufacturer ☒ Mutual fund service
3. Type of corporation ▶ ☒ R&D ☒ Classified manufacturing ☒ RIC ☒ REIT
4. Is the corporation filing a Massachusetts unitary return? ▶ ☒ Yes ☒ No
5. Is the corporation's tax year different from the 355U? ▶ ☒ Yes ☒ No
6. Is the corporation an insurance mutual holding corporation? ▶ ☒ Yes ☒ No
7. Is the corporation requesting alternate apportionment? ▶ ☒ Yes ☒ No
8. Is this a final Massachusetts return? ▶ ☒ Yes ☒ No
9. Principal business code ▶ 9 XXXXXXXX
10. FID of principal reporting corporation if answer to line 4 is Yes ▶ 10 XXXXXXXX
11. Average number of employees in Massachusetts 11 XXXXXXXX
12. Average number of employees worldwide 12 XXXXXXXX
13. Date of charter or first date of business in Massachusetts 13 XXXXXXXX
14. Last year audited by IRS ▶ 14 XXXX
15. Have adjustments been reported to Massachusetts? ☒ Yes ☒ No
16. Is the corporation deducting intangible or interest expenses paid to a related entity? ▶ ☒ Yes ☒ No
17. Is the taxpayer enclosing a Taxpayer Disclosure Statement? ▶ ☒ Yes ☒ No
18. Is the taxpayer claiming exemption from the income measure of the excise pursuant to PL 86-272? ▶ ☒ Yes ☒ No

**SIGN HERE. Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.**

Signature of appropriate officer Date XXXXXXXX Print paid preparer's name Paid preparer's SSN or PTIN  
Title Paid preparer's phone Paid preparer's EIN XXXXXXXXXX

Are you signing as an authorized delegate of the appropriate officer of the corporation? (see instructions) ☒ Yes ☒ No Paid preparer's signature Date XXXXXXXX Check if self-employed ☒

Taxpayer's e-mail address  
XXX

PRIVACY ACT NOTICE AVAILABLE UPON REQUEST

XXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX



# 2013 Excise Calculation

XXXXXXXXXXXX

Business or Manufacturing Corporation Excise Return

FEDERALIDNUM

AREA RESERVED  
FOR 2-D BARCODE

1.	Taxable Massachusetts tangible property, if applicable	▶	XXXXXXXXXXXX	×	.0026 = ▶	1	XXXXXXXXXXXX
2.	Taxable net worth, if applicable	▶	XXXXXXXXXXXX	×	.0026 = ▶	2	XXXXXXXXXXXX
3.	Massachusetts taxable income	▶	XXXXXXXXXXXX	×	.0800 = ▶	3	XXXXXXXXXXXX
4.	Credit recapture				▶	4	XXXXXXXXXXXX
5.	Tax on installment sales				▶	5	XXXXXXXXXXXX
6.	Excise before credits					6	XXXXXXXXXXXX
7.	Total credits				▶	7	XXXXXXXXXXXX
8.	Excise after credits					8	XXXXXXXXXXXX
9.	Combined filer tax due					9	XXXXXXXXXXXX
10.	Minimum excise					10	XXX
11.	Excise due before voluntary contribution					11	XXXXXXXXXXXX
12.	Voluntary contribution for endangered wildlife conservation				▶	12	XXXXXXXXXXXX
13.	Excise due plus voluntary contribution				▶	13	XXXXXXXXXXXX
14.	2012 overpayment applied to your 2013 estimated tax				▶	14	XXXXXXXXXXXX
15.	2013 Massachusetts estimated tax payments				▶	15	XXXXXXXXXXXX
16.	Payment made with extension				▶	16	XXXXXXXXXXXX
17.	Pass-through entity withholding. Payer ID number ▶	XXXXXXXXXXXX			▶	17	XXXXXXXXXXXX
18.	Total refundable credits				▶	18	XXXXXXXXXXXX
19.	Total payments					19	XXXXXXXXXXXX
20.	Amount overpaid					20	XXXXXXXXXXXX
21.	Amount overpaid to be credited to 2014 estimated tax				▶	21	XXXXXXXXXXXX
22.	Amount overpaid to be refunded				Refund ▶	22	XXXXXXXXXXXX
23.	Balance due				Balance due ▶	23	XXXXXXXXXXXX
24.	a. M-2220 penalty ▶	XXXXXXX	b. Late file/pay penalties	XXXXXXX	a + b =	24	XXXXXXXXXXXX
25.	Interest on unpaid balance					25	XXXXXXXXXXXX
26.	Total payment due at time of filing				Total due ▶	26	XXXXXXXXXXXX

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